



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re U.S. Patent Application of )  
SATOU et al. ) Art Unit 2819  
Application Number: 10/667,446 )  
Filed: September 23, 2003 )  
For: OUTPUT BUFFER CIRCUIT WITH CONTROL )  
CIRCUIT FOR MODIFYING SUPPLY VOLTAGE AND )  
TRANSISTOR SIZE (AS AMENDED) )  
Attorney Docket No. HITA.0386 )

Honorable Assistant Commissioner for Patents  
Washington, D.C. 20231

**COVER LETTER**

Sir:

[ x ] The fee for submission of claims is calculated as shown below:

| FOR   | TOTAL WITH NEW CLAIMS ADDED | TOTAL CURRENTLY ON FILE | CLAIMS PAID   | RATE    | CALCULATION |
|---|-----------------------------|-------------------------|---------------|---------|-------------|
| Total Claims  | 3                           | 3                       | (Over 20)     | x \$50  | 0           |
| Independent Claims  | 1                           | 1                       | 5<br>(Over 3) | x \$200 | 0           |
| MULTIPLE DEPENDENT CLAIM(S)   |                             |                         |               | + \$360 | 0           |
| REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).<br>IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED |                             |                         |               |         |             |
|   |                             |                         | TOTAL         |         | 0           |

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

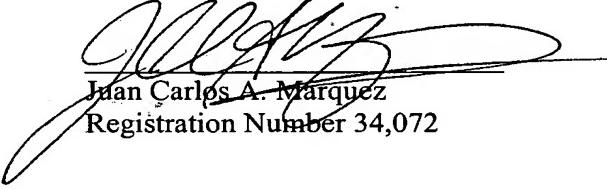
- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Response to Office Action<br>(no claim amendments) | <input checked="" type="checkbox"/> Petition for Extension of Time (2 months)                         |
| <input type="checkbox"/> Substitute Abstract   | <input checked="" type="checkbox"/> Terminal Disclaimer   |
| <input type="checkbox"/> Preliminary Amendment   | <input type="checkbox"/> Letter to Draftsman w/ sheets of drawings                                    |
| <input type="checkbox"/> Other _____   | <input type="checkbox"/> Sequence Listing<br><input type="checkbox"/> Sequence Listing Diskette _____ |

[ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.

- [ x ] Checks in the amount of **\$450.00** to cover the two-month extension and **\$130.00** to cover the terminal disclaimer fee are enclosed.
- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
Stanley P. Fisher  
Registration Number 24,344

  
Juan Carlos A. Marquez  
Registration Number 34,072

**REED SMITH LLP**  
3110 Fairview Park Drive  
Suite 1400  
Falls Church, Virginia 22042  
(703) 641-4200

**March 18, 2005**